



NOTICE OF APPEAL FROM THE PRIMARY EXAMINER
TO THE BOARD OF APPEALS

TECH CENTER 160012900

APR 09 2003

RECEIVED

Applicants:

Thomas J. Hudson, James C. Engert and Andrea Richter

Application No.:

09/693,205

Group:

1653

Filed:

October 20, 2000

Examiner:

C. Kam

Confirmation No.:

7268

For:

IDENTIFICATION OF ARSACS MUTATIONS AND METHODS
OF USE THEREFOR

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>4/4/03</u>	<u>Paula Depelteau</u>
Date	Signature
<u>PAULA DEPELTEAU</u>	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents

Box AF

P.O. Box 2327

Arlington, VA 22202

Sir:

Applicants hereby appeal to the Board of Appeals from the decision dated January 7, 2003 of the Primary Examiner finally rejecting claims 2-4 and 6-8. The items checked below are appropriate:

1. ☐ Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated [] for [] month(s) from [] to [].
2. ☐ A [] month extension of time to respond to the Office Action Made Final dated [] was filed on [] with payment of a \$[] fee.
☐ Applicant hereby petitions for an additional [] month extension of time to respond to the Office Action Made Final.
3. ☐ A Request for Oral Hearing before the Board of Patent Appeals and Interferences is being filed concurrently herewith.

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4. Fees are submitted for the following:

<input type="checkbox"/>	Extension of Time for [] month(s)	\$	_____
<input type="checkbox"/>	Additional Extension of Time:		
	Fee for Extension ([] mo.)	\$	_____
	Less fee paid ([] mo.)	- \$	_____
	Balance of fee due	\$	<u>0</u>
<input checked="" type="checkbox"/>	Notice of Appeal	\$	<u>320</u>
<input type="checkbox"/>	Other _____	\$	_____
	TOTAL	\$	<u><u>320</u></u>

5. The method of payment for the total fees is as follows:

- ☒ A check in the amount of \$320.00 is enclosed.
- ☐ Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

By Lisa M. Treannie
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Date: 4/4/03